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LETTERS TO THE EDITOR



[*The Editor is not responsible for opinions expressed in this Department.*]

A REPLY

DEAR EDITOR: In reply to L. R.'s letter, in the December JOURNAL, I would like to say I think her suggestion an excellent one. Private duty seems to be the only branch of the nursing world that is not organized, and the private nurse is the one most in need of the support that such an organization would give.

The nurse holding a hospital position is kept in touch with all the new ideas, and is, therefore, continually advancing in her profession, while the private duty nurse on the other hand is continually falling behind if she does not have something to keep her in touch with the more progressive ideas.

Why could not the presidents of the various alumnae associations take the vote of all the private nurses in their associations on this question, and find out how many are in favor of starting an organization of this kind?

A PRIVATE NURSE.

[Our present difficulties are that we have too many, rather than too few organizations. The various alumnae associations and the Associated Alumnae are made up largely of private duty nurses, though they include also members of the teaching profession, and it would seem to us far wiser, if only from practical and economic motives, to discuss private duty problems at the sessions of these societies, already organized, than to create new bodies of nurses.—Ed.]

CARE OF MORE THAN ONE PATIENT

DEAR EDITOR: Will some of the nurses tell me through the JOURNAL what the charges should be when called into a home where there are two or more patients to care for?

I have been in homes where there have been more than one, and have received what is usual for one only.

E. N.

HOW TO KEEP FOOD WARM

DEAR EDITOR: I would like to tell E. J., who asks for suggestions in keeping food warm in a small, poorly-equipped hospital, of our improvised heater.

In Porto Rico our general kitchen was some distance from the patients' buildings, and with the trade winds constantly blowing the food was rapidly cooled until we devised the following heater:

A galvanized iron box, water tight, about 3 feet by 2 feet and 9 or 10 inches deep, with five holes, two on each end and one, a little larger, in the centre to contain a soup kettle. We bought rather shallow blue and white enamel covered dishes to fit and sink into the holes. There was a handle on each end of the heater and a faucet to let out the water. Just a few minutes before

sending the food to the diet kitchen, hot or boiling water was poured into the heater, and the covered dishes placed in the holes to warm them before serving the food. Two persons carried the food to the building. After this we had no further trouble in keeping food warm. E. J. W.

CARE OF NURSES' FEET

DEAR EDITOR: May I sound a word of warning in the ears of superintendents of nurses?

Be careful of your probationers' feet; before they complain, watch how they walk, question them, and on their first word of complaint take them off duty and consult your orthopædist about them.

Some years ago an acquaintance of mine ruined her feet in a Philadelphia hospital; she is still lame.

Quite recently a friend entered one of the best training schools in New York City. No attention was paid to her complaint about her feet, she has been compelled to give up a work for which she seemed well adapted, and is still suffering from the lack of ordinary care to which I think she was entitled.

MARY I. CHAMBERS,

Superintendent St. Luke's Hospital.

St. Louis, Mo.

PROGRESS IN NEW JERSEY

DEAR EDITOR: Allusion having been made in the December JOURNAL to the New Jersey State law for licensing nurses, I wish to call attention to an effort now in progress by the New Jersey State Nurses' Association, to enlist the interest of every nurse resident in the state, towards having said law repealed, or amended in such way as to enable us to set a high standard for professional education and practice.

The present law requires no examination nor any school standard, except that every nurse who practises as a trained nurse must first be licensed on presentation of a diploma, awarded by a training school connected with a hospital giving a two years' course of practical and theoretical training.

Many of us here feel that the nurses of New Jersey, in justice to themselves and to their profession, must produce something better and more progressive.

In order to enlist every graduate nurse in the state in this most important work, during the coming year it is proposed to organize six local societies, embracing the nurses of all the counties of the state; these local societies in turn to become component parts of the state association.

We need every individual nurse vitally interested because we need their help, and this law, when passed, should represent the sentiment of the mass.

The first local society was set in motion on December 7, 1910, at a meeting at Englewood, when twenty applications were received for membership, representing the nurses of two counties, those of Bergen and Passaic. Plans are also on foot to organize the three counties of Essex, Warren, and Somerset, in January, 1911, into one society.

With these combined objects in view, a mass meeting will be held at Newark early in February (date to be announced later), when Miss McIsaac will speak in the interest of this work now in progress. We feel that now is